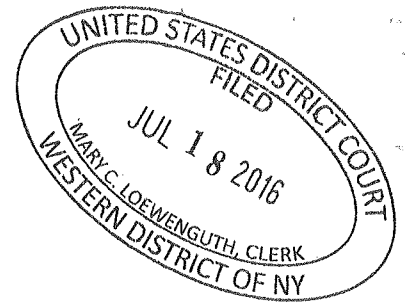


Revised 03/06 WDNV

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF NEW YORKFORM TO BE USED IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983
(Prisoner Complaint Form)

16-CV-594 A

All material filed in this Court is now available via the **INTERNET**. See **Pro Se Privacy Notice** for further information.

1. CAPTION OF ACTION

A. Full Name And Prisoner Number of Plaintiff: NOTE: If more than one plaintiff files this action and seeks in forma pauperis status, each plaintiff must submit an in forma pauperis application and a signed Authorization or the only plaintiff to be considered will be the plaintiff who filed an application and Authorization.

1. Reeseie E. Nash, #49658

2. _____

-VS-

B. Full Name(s) of Defendant(s) NOTE: Pursuant to Fed.R.Civ.P. 10(a), the names of all parties must appear in the caption. The court may not consider a claim against anyone not identified in this section as a defendant. If you have more than six defendants, you may continue this section on another sheet of paper if you indicate below that you have done so.

- | | |
|---|---|
| 1. <u>Salvatore Valvo - Erie County D.A. Investigator</u> | 4. <u>Erie County District Attorneys Office</u> |
| 2. <u>Sgt. Slimak Erie Cnty. Sheriffs Dept.</u> | 5. <u>Erie County Sheriffs Dept. Jail Management Division</u> |
| 3. <u>Dep. Knouffer Erie Cnty. Sheriffs Dept.</u> | 6. <u>Erie County Holding Center</u> |
| 7. <u>Thomas Kubiniec - ALT - NYS PAROLE</u> | 8. <u>Dennis Uminski - ESQ.</u> |
| 9. <u>Kenneth Wells - PRS - NYS PAROLE</u> | 10. <u>Daniel Griebel - ESQ.</u> |
| 11. <u>Aid To Indigent Prisoners</u> | |

2. STATEMENT OF JURISDICTION

This is a civil action seeking relief and/or damages to defend and protect the rights guaranteed by the Constitution of the United States. This action is brought pursuant to 42 U.S.C. § 1983. The Court has jurisdiction over the action pursuant to 28 U.S.C. §§ 1331, 1343(3) and (4), and 2201.

3. PARTIES TO THIS ACTION

PLAINTIFF'S INFORMATION NOTE: To list additional plaintiffs, use this format on another sheet of paper.

Name and Prisoner Number of Plaintiff: Reeseie E. Nash #49658Present Place of Confinement & Address: 40 Delaware Ave. 11581, Walden Ave.
Bflo., N.Y. 14202 Alden, N.Y. 14004Name and Prisoner Number of Plaintiff: Name of Defendant: Erie County Holding CenterPresent Place of Confinement & Address: Position of Defendant: Incorporated Person Holding PlaintiffDefendant is sued in X Individual and X official CapacityAddress of Defendant: 40 Delaware AveBflo., N.Y. 14202

Name of Defendant: Slimak

Position: Sergeant

Defendant Sued In X Individual X Official Capacity

Address: 40, Delaware Ave; Bflo., N.Y. 14202

Name of Defendant: C. Danzi

Position: Employee - Erie County District Attorneys office

Defendant Sued In X Individual X Official Capacity

Address: 25, Delaware Ave; Bflo., N.Y. 14202

Name of Defendant: Kenneth Wells

Position: Parole Revocation Specialist

Defendant Sued In X Individual X Official Capacity

Address: 460, Main St.; Bflo., N.Y. 14202

Name of Defendant: Thomas Kubiniee

Position: Admin. Law Judge

Defendant Sued In X Individual X Official Capacity

Address: 11581, Walden Ave; Alden, N.Y. 14004

Name of Defendant: Dennis Jminski

Position: Attorney - NYS

Defendant Sued In X Individual X Official Capacity

Address: 3881, West Seneca St.; West Seneca, N.Y. 14224

Name of Defendant: Daniel Griebel

Position: Attorney - NYS

Defendant Sued In X Individual X Official Capacity

Address: ~~445~~ P.O. Box 495; Bflo., N.Y. 14223

Name of Defendant: Aid To Indigent Prisoners

Position: Constitutional Safeguard - Appointee of Counsel

Defendant Sued In X Individual X Official Capacity

Address: 170, Franklin St.; Crosby Bldg.; Bflo., N.Y. 14202

Name of Defendant: Knupfer

Position: Deputy - Erie County Sheriff Dept.

Defendant Sued In X Individual X Official Capacity

Address: 40, Delaware Ave; Bflo., N.Y. 14202

DEFENDANT'S INFORMATION NOTE: To provide information about more defendants than there is room for here, use this format on another sheet of paper.

Name of Defendant: Salvatore Valvo

(If applicable) Official Position of Defendant: Investigator @ Erie County District Atty. Ofc.

(If applicable) Defendant is Sued in X Individual and/or X Official Capacity

Address of Defendant: 25 Delaware Ave.

Bflo., NY 14202

Name of Defendant: Erie County District Attorney's Office

(If applicable) Official Position of Defendant: District Attorney - Erie County

(If applicable) Defendant is Sued in X Individual and/or X Official Capacity

Address of Defendant: 25 Delaware Ave.

Bflo., N.Y. 14202

Name of Defendant: Erie County Sheriffs Department - Jail Management Div.

(If applicable) Official Position of Defendant: Division of Jail Management

(If applicable) Defendant is Sued in X Individual and/or X Official Capacity

Address of Defendant: 40 Delaware Ave

Bflo., N.Y. 14202

CONT.

4. PREVIOUS LAWSUITS IN STATE AND FEDERAL COURT

- A. Have you begun any other lawsuits in state or federal court dealing with the same facts involved in this action?
Yes X No

If Yes, complete the next section. NOTE: If you have brought more than one lawsuit dealing with the same facts as this action, use this format to describe the other action(s) on another sheet of paper.

1. Name(s) of the parties to this other lawsuit:

Plaintiff(s): Reese Nash

Defendant(s): Timothy Howard - Erie County Sheriff

2. Court (if federal court, name the district; if state court, name the county): Western District

3. Docket or Index Number: 13 - cv -

4. Name of Judge to whom case was assigned: Fashio / Arcara

5. The approximate date the action was filed: December 2013 / ?
6. What was the disposition of the case? → Settlement in Favor of Plaintiff
- Is it still pending? Yes No X
- If not, give the approximate date it was resolved. 3/2015
- Disposition (check the statements which apply):
- Dismissed (check the box which indicates why it was dismissed):
- By court *sua sponte* as frivolous, malicious or for failing to state a claim upon which relief can be granted;
- By court for failure to exhaust administrative remedies;
- By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
- By court due to your voluntary withdrawal of claim;
- X Judgment upon motion or after trial entered for
- X plaintiff
- defendant.

B. Have you begun any other lawsuits in federal court which relate to your imprisonment?

Yes X No

If Yes, complete the next section. NOTE: If you have brought more than one other lawsuit dealing with your imprisonment, use this same format to describe the other action(s) on another sheet of paper.

1. Name(s) of the parties to this other lawsuit:
- Plaintiff(s): Reverie Nash
- Defendant(s): Erie County Corr. Fac.; C.O. Lafredo; C.O. Walawender;
2. District Court: Western
3. Docket Number: 03-CV-
4. Name of District or Magistrate Judge to whom case was assigned: Foschio / Western
5. The approximate date the action was filed: 1/2003
6. What was the disposition of the case?
- Is it still pending? Yes No X
- If not, give the approximate date it was resolved. 6/2005

Disposition (check the statements which apply): → Settlement in Favor of Plaintiff

 Dismissed (check the box which indicates why it was dismissed):

- By court *sua sponte* as frivolous, malicious or for failing to state a claim upon which relief can be granted;
- By court for failure to exhaust administrative remedies;
- By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
- By court due to your voluntary withdrawal of claim;

X Judgment upon motion or after trial entered for

- X plaintiff
- defendant.

5. STATEMENT OF CLAIM

For your information, the following is a list of some of the most frequently raised grounds for relief in proceedings under 42 U.S.C. § 1983. (This list does not include all possible claims.)

- | | | |
|----------------------|--------------------------|-------------------------------|
| • • Religion | • • Access to the Courts | • • Search & Seizure |
| • • Free Speech | • False Arrest | • Malicious Prosecution |
| • • Due Process | • Excessive Force | • Denial of Medical Treatment |
| • • Equal Protection | • Failure to Protect | • Right to Counsel |

Please note that it is not enough to just list the ground(s) for your action. You **must** include a statement of the facts which you believe support each of your claims. In other words, tell the story of what happened to you but do not use legal jargon.

Fed.R.Civ.P. 8(a) states that a pleading must contain "a short and plain statement of the claim showing that the pleader is entitled to relief." "The function of pleadings under the Federal Rules is to give fair notice of the claim asserted. Fair notice is that which will enable the adverse party to answer and prepare for trial, allow the application of res judicata, and identify the nature of the case so it may be assigned the proper form of trial." Simmons v. Abruzzo, 49 F.3d 83, 86 (2d Cir. 1995). **Fed.R.Civ.P. 10(b)** states that "[a]ll averments of claim ... shall be made in numbered paragraphs, the contents of each of which shall be limited as far as practicable to a single set of circumstances."

Exhaustion of Administrative Remedies

Note that according to 42 U.S.C. § 1997e(a), "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prison er confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

You must provide information about the extent of your efforts to grieve, appeal, or otherwise exhaust your administrative remedies, and you must attach copies of any decisions or other documents which indicate that you have exhausted your remedies for each claim you assert in this action.

FORM 9011CS (10/11)

STATE OF NEW YORK
DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION
NOTICE OF VIOLATIONTO: NASH, Reeseie INST. #: 07-B-3157WARRANT #: 749838 NYSID #: 08257936-Q

You are charged with violating the conditions of your release in the manner specified on the attached violation of release report.

A preliminary hearing on these charges has been scheduled on 04/04/16 at 9:00 A.M. at ECCF
Date Time Place

Should you waive a preliminary hearing or should probable cause be found at this hearing that you have violated the condition of your release in an important respect, a

final hearing on these charges will be held on 04/19/16 at 9:00 A.M. at ECCF-11581 Walden Ave., Alden, NY
Date Time Place

In the event that your return to the State of New York cannot be effected for the hearing as scheduled above due to circumstances beyond the Department's control, you will be afforded a preliminary hearing and final revocation hearing at such time as you may become available for return on the Department's warrant.

You have the right to a preliminary and final violation hearing. A preliminary hearing may be held to determine whether there is probable cause to believe that you violated one or more of the conditions of your release in an important respect. At this hearing you are entitled to appear and speak on your own behalf; introduce letters and documents; present witnesses who can give relevant information; and confront and cross-examine adverse witnesses. Proof of your conviction of a crime committed after your release shall constitute probable cause for the purpose of the preliminary hearing. You may be represented by counsel. It is your responsibility to obtain counsel. Your waiver of this preliminary hearing is equivalent to a finding of probable cause.

In the event that you are convicted of either a misdemeanor or a felony committed while under community supervision and a preliminary hearing has not been completed, you will not be entitled to the preliminary hearing on the basis of the new conviction. Any preliminary hearing which may have been scheduled may therefore be cancelled upon your conviction for such misdemeanor or felony.

Following the establishment of probable cause, the Board of Parole or its designee will review your case and may order that you be held for a final revocation hearing.

At the final revocation hearing, the presiding officer will determine whether there is a preponderance of evidence to support each of the charged violations. At this hearing, you have a right to be represented by counsel; to speak on your own behalf; have the right to introduce letters and documents; present witnesses who can give relevant information; and confront and cross-examine adverse witnesses against you. At this hearing, you also have the right to present mitigating evidence relevant to your restoration to community supervision.

In the event that you are convicted of a felony committed while under community supervision and you receive a new indeterminate or determinate sentence, any final revocation hearing which has been scheduled for you may be cancelled. In such instances, the Board of Parole may issue a final declaration of delinquency based upon that conviction and sentence.

In the event the Board of Parole issues a final declaration of delinquency, you will be served a copy of that determination together with a copy of the commitment.

Should you be convicted of a crime committed after your release, it is the intention of the Department of Corrections and Community Supervision to introduce evidence of your conviction at the time of your revocation hearing.

A request to adjourn either scheduled hearing should be made in the case of a preliminary hearing, at least three (3) days, and in the case of a final hearing, at least seven (7) days prior to the hearing, in writing, to the local area office. Requests for adjournments made at the hearing will only be granted for good cause shown.

Violation of Release Report received:
[Signature] Signature 3/28/16 Date

All persons charged with a violation of parole are required to be present at all proceedings regarding that violation of community supervision which are authorized by the Board of Parole. Any voluntary failure on your part to be present at any of these proceedings may result in a finding that your failure to appear was a voluntary, knowing and intelligent waiver of your right to appear. Should such a finding be made, a hearing in absentia can be held and a final determination be made regarding the charges pending against you, including, if necessary, a time assessment because of the violation of community supervision.

☒ I DO wish to have a preliminary hearing.3/28/16 Date
03/28/2016 Date☐ I DO NOT wish to have a preliminary hearing.[Signature] Signature of Releasee
0137 Signature of Witness

If you cannot afford an attorney and wish to have counsel at your preliminary hearing, sign and detach this form. It is your responsibility to mail the form to the address shown on the form. If you request assigned counsel at your preliminary hearing, you must mail this form IMMEDIATELY.

TO: Aid to Indigent Prisoners RE: NASH, Reeseie Name
170 Franklin St. Crosby Bldg. DOB: 03/01/80
Buffalo, NY 14202 WARRANT # 749838

I am an alleged community supervision violator being held at:

I am scheduled for a preliminary hearing to be held on 04/04/16 at 9:00 A.M. at ECCF
Date Time PlaceI have waived my preliminary hearing. A final hearing has been scheduled for 04/19/16 Dateat 9:00 A.M. at ECCF-11581 Walden Ave., Alden, NY 14004
Time Place

I cannot afford an attorney and request that I be assigned counsel.

[Signature] Releasee Name

A. FIRST CLAIM: On (date of the incident) June 22nd 2016

defendant (give the name and position held of each defendant involved in this incident) Erie County District Attorney's Office; Salvatore Valvo; [Erie County District Attorney's Office Investigator]; C. Danzi; [Erie County District Attorneys office Employee] did the following to me (briefly state what each defendant named above did): Arbitrarily and capriciously, seized my legal work, [24 hours prior] to my trial (BCC-Hon. Wray); exceeding the jurisdiction of a search warrant which specified items to be seized, which did not extend to legal work; outlined defense to criminal charges; which prejudiced plaintiff, requiring adjournment [and] affected criminal defense. The Erie County District Attorneys Office used a warrant, narrowly specifying items to be seized as [material relating to homicide], to confiscate all legal work and documents of plaintiffs, in excess of warrants jurisdiction, and did alter and initial said warrant also.
~~*SEE EXHIBIT A*~~ ~~SEE ATTACHMENT*~~
 The constitutional basis for this claim under 42 U.S.C. § 1983 is: U.S.C.A. CONST. AMENDS. 1, 4, 5, 6, 8, 14

The relief I am seeking for this claim is (briefly state the relief sought): Monetary Judgment In The Amount of \$5,000,000.00

Exhaustion of Your Administrative Remedies for this Claim:

Did you grieve or appeal this claim? _____ Yes ☒ No If yes, what was the result? _____

Did you appeal that decision? _____ Yes ☒ No If yes, what was the result? _____

Attach copies of any documents that indicate that you have exhausted this claim.

If you did not exhaust your administrative remedies, state why you did not do so: There is no known form of Grieving such Gross Negligent Conduct of said Public Servant's

A. SECOND CLAIM: On (date of the incident) June 11th and June 13th 2016

defendant (give the name and position held of each defendant involved in this incident) Erie County Sheriff's Department - Sergeant Slimak; Erie County Sheriff's Department Deputy Knupfer

did the following to me (briefly state what each defendant named above did): violated HIPPA laws while employed in County Jail, where on 10/11/16, Sgt. Slimak did announce to Ramadan inmates that due to plaintiffs "highly infectious disease", nurse must check inmates upper torso requiring full strip of upper torso; then, on 10/13/16, Deputy Knupfer, openly stated to Ramadan inmates "You guys have to make a feed up tray for Mr. Nash because he has Scabies and cannot attend." I did in fact walk into service as this statement was made, violative of HIPPA.
 SEE EXHIBIT B SEE ATTACHMENT*
 The constitutional basis for this claim under 42 U.S.C. § 1983 is: U.S.C.A. CONST. AMEND'S 8, 14, 1

The relief I am seeking for this claim is (briefly state the relief sought): \$500,000.00 in damages to Slimak; \$500,000.00 in damages to Knupfer @ \$1,000,000.00

Exhaustion of Your Administrative Remedies for this Claim:

Did you grieve or appeal this claim? X Yes No If yes, what was the result? Administration, alleged fictitious inmates denied allegations without officers admission/denials.
 Did you appeal that decision? X Yes No If yes, what was the result? Facility failed to respond due to faulty Grievance process which I grieved also, but verbally agreed to transfer to other County Jail for Sgt. Knupfer's complaint.
 Attach copies of any documents that indicate that you have exhausted this claim.

If you did not exhaust your administrative remedies, state why you did not do so:

See: Third Claim Attachment & Fourth Claim Attachment.

If you have additional claims, use the above format and set them out on additional sheets of paper.

6. RELIEF SOUGHT

Summarize the relief requested by you in each statement of claim above.

Monetary award of \$5,000,000.00 for first claim; \$1,000,000.00 for second claim; \$1,000,000.00 for third claim @ \$7,000,000.00 in Monetary Damages for all three claims; For fourth claim \$8,000,000.00 in Monetary Damages, being \$15,000,000.00 total in damages.

Do you want a jury trial? Yes X No

Cont.

First Claim : Seizure of legal work did disrupt plaintiff's ability to continue a trial before Honorable Judge Givens and Honorable Judge Wray; it prevented the proper preparation and reply to CPLR AET 78 - Index: I. 2016-0071 and in fact, exposed legal defenses to pending criminal case's in Buffalo City Court, whereas, privileged correspondence between my attorney's and myself were confiscated and not returned until 6/28/16. Both trial dates were adjourned due to this illegal seizure and whereupon the CPLR AET. 78 was returnable 7/5/16 and 'Answer' received 6/29/16, plaintiff, faced with deadline, was unable to properly reply to said motion to which his freedom is hinged upon. Illegal conduct violated equal protection, right against self incrimination, due process, access to the courts, prejudiced my defense, my right against warrantless seizure's and inflicted cruel and unusual punishment in retaliation for not cooperating with B.P.D Homicide Investigators to which - constitutionally, I have an absolute right to resist. @.

Plaintiff has legal standing to assert his right to privacy as to his medical concerns, ailments and conversations regards medical concerns and ailments. This right was alienated by Deputy Knupfer and Sergeant Slimak, without right, just cause, or privilege. The announcement did prejudice me, harm my right to religious expression and free practice when congregants refused to pray alongside me, during congregational prayer, for fear of acquiring "Highly Infectious Disease" - "Scabies". This prejudice was so great, facility agreed to transfer plaintiff, after Rammadan, to avoid further prejudice based upon this HIPPA violations, and did on 7/8/16, transfer plaintiff to Erie County Correctional Facility, (2) days after Rammadan's end. (R)

A. THIRD CLAIM On, March 25th; April 8th; April 15th; April 22nd; May 16th; and May 20th - 2016; and continually thereafter,

The Erie County Holding Center; The Erie County Sheriffs Dept.;

And The Erie County Sheriffs Department Jail Management Division

Did The Following To Me: Failed to offer, provide or create any policy protecting my right to practice Islam, in that religious services are not being held. This discriminatory practice of failing to meet the needs of muslim inmates dates beyond the early 1990's and still continues today. Catholics enjoy mass weekly, as with Christian faiths. No policy nor plan exists due to a clear and deliberate indifference towards the Muslim faith - Al Islam. In fact, and as shown in grievances, their selected "Imam" agrees that muslims should not have service unless said "Imam" is there, when clearly, the Imam is consistently delinquent, prejudicial to muslim inmates/detainees, affecting my right to practice my religion, make the congregational Friday prayer, have access to religious cleric, thereby abridging my freedom of speech, right to peaceful assemble, equal protection of the laws and is therefore cruel and unusual punishment.

The Constitutional basis for this claim under 42 U.S.C. § 1983 is:

U.S.C.A. Const. Amend.'s 1, 8 and 14

The relief I am seeking for this claim is: Monetary Judgment
 in The Amount of \$1,000,000.00

Did you grieve or appeal this claim - Yes

Results? Deprivation is continual, facility lacks solution

Did you appeal that decision - Yes

Results? Deprivation is continual, facility failed to reply

The N.Y.S. Parole Revocation Specialist, Kenneth Wells; Administrative Law Judge Thomas Kubiniec and Attorney Daniel Griebel; Dennis Uminski;

Did the following To Me: Violated my constitutional right to due process, in that Dennis Uminski is my assigned attorney and I have never seen, heard nor spoken to him. Kenneth Wells is N.Y.S. Parole Revocation Specialist, charged with knowing who my attorney of record is and never corrected proceedings in that I have never been represented by my attorney, rather instead, allowed an unjustifiable delay of more than 90 days be adjourned by a man who is not my attorney, on two separate occasions, (see Ex. 13 - compare to card and scheduling sheet of Ex. 14), without justification to do so. The administrative law judge is charged with calendar control and marshalling of the case. This attorney, Daniel Griebel, was allowed by the Judge, to consume more than 90 days - charged to plaintiff, as an illegal tactic by Parole to prolong calendar dates in order to prepare prosecution, chargeable to plaintiff, while preventing my attorney, Dennis Uminski, from representing me. Daniel Griebel has prepared no defense nor argued for any discoverable items, only offering 30 month and 24 month plea's off record, respectively. If Dennis Uminski is my attorney, he has not defended me. If Daniel Griebel is my attorney, he has not defended me, although by show of proof, he is not and Parole's specialist and Judge knew he was not my attorney, was not assigned to me, my case and Parole unconstitutionally affects my defense when by unfair, grossly prejudicial tactics, they prejudice my defense by interfering with my defense and counsel by requiring that I use whomever the [Board of Parole] appoints vs. 'Aid To Indigent Prisoners'. @// Constitutional Basis: Due Process, Right to Counsel - Effective; Equal Protection; ~~Motions For~~ Free Speech; Failure To Protect.

The Relief I am Seeking: \$8,000,000.00 Dollars In Monetary Damages

* NO GRIEVANCE PROCEDURES AVAILABLE *

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 7/4/16
(date)

NOTE: Each plaintiff must sign this complaint and must also sign all subsequent papers filed with the Court.

R. S. A. [Signature]

Signature(s) of Plaintiff(s)

The following Intake Control Numbers and Initials thereafter represent Ramadan participants who both heard Sgt. Stimak state that I, Reese Nash #49658, had a "Highly Infectious Disease" (called) "Scabies" and was present when Sgt. Stimak handed out flyers, medically informing reader what scabies was and its symptoms, and was partially stripped during Ramadan Eve. on 6/11/16, PM Shift.

Also, Signors did witness deputies allege that I, Reese Nash, had "scabies" and therefore needed a feed up tray because nurse present @ approx. 3:30 am, stated to the security staff that I, Reese Nash, was Medical keeplock due to scabies, and did allege same to Ramadan participants on 6/13/16, 11pm - 7am shift.

ICN# 75548

Initials: JG

ICN# 106991

Initials: DT

ICN# 99706

Initials: JW

ICN# 67989

Initials: JS

ICN# 49658

Initials: RN (only as to: 6/13/16)

ICN#

Initials:

ICN#

Initials:

ICN# 66824

Initials: R.F.D.

Dated: 6/18/16

8

EVIDENCE

AGENCY ECDA

ITEM NO. _____ CASE NO. _____

DATE AND TIME OF COLLECTION DATE 6/22/16 TIME 11:30 (AM) PMCOLLECTED BY S. Valvo OFFENSE _____DESCRIPTION AND/OR LOCATION OF EVIDENCE Paper work from
search of Jail cell of R. Nash

SUSPECT _____ VICTIM _____

REMARKS _____

CHAIN OF CUSTODY

RECEIVED FROM <u>S. Valvo</u>	BY <u>C. DANZI</u>
DATE _____	TIME <u>6/22/16 4:00</u> AM <u>(PM)</u>
RECEIVED FROM _____	BY _____
DATE _____	TIME _____ AM PM
RECEIVED FROM _____	BY _____
DATE _____	TIME _____ AM PM
RECEIVED FROM _____	BY _____
DATE _____	TIME _____ AM PM

EVIDENT © Crime Scene Products
1-800-576-7606

Exhibit 1

SEARCH WARRANT

Pursuant to Section 690.05 Et Seq.
Of the Criminal Procedure Law

County Court
County of Erie, State of New York

IN THE NAME OF THE PEOPLE OF THE STATE OF NEW YORK

TO: Inv. Salvatore Valvo, any other Investigator of the Erie County District Attorney's Office Buffalo Police Department and any member of the Erie County Sheriff's Department.

Proof, by affidavit, having been made this day before me by Inv. Salvatore Valvo, that there is probable cause to believe, pursuant to CPL 690.10 that certain property constitutes evidence or tends to demonstrate that an offense or crime was committed or that a particular person participated in the commission of an offense or crime, to wit: the murder of Kelvin Alexander on March 20, 2016 at 857 Genesee Street in the City of Buffalo,

said property consisting of:

- (1) Any notes, communications, papers, or any other materials containing written information regarding the homicide of Kelvin Alexander

YOU ARE THEREFORE COMMANDED, within 5 days of the issuance of this warrant, to make an immediate search of the Erie County Holding Center, Buffalo, NY, and seize the following:

- (1) Any notes, communications, papers, or any other materials containing written information regarding the homicide of Kelvin Alexander

And upon seizure of the forgoing all recovered material will be immediately turned over to the issuing court for an in camera review and any material

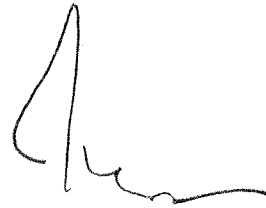
determined to be relevant to the homicide of Kelvin Alexander will be provided to the District Attorney's Office whereas all other material will be returned to the defendant.

And once the materials have been provided to the District Attorney's Office file a return of such seizures with this Court at the County Court in the County of Erie, New York.

Dated at the said County of Erie, New York

The 21st day of June, 2016

At 2:40 AM/PM

A handwritten signature in black ink, appearing to read 'Thomas P. Franczyk', written over a horizontal line.

Hon. Thomas P. Franczyk, J.C.C.

NE, NY
Nash
11-25-13
Re: Not having a service
consistent with Muslim service
#1409



New York State Commission of Correction



Grievance Form Part I

Facility: Erie County Sheriff's Office—Jail Management Div.

☒ Holding Center NY014023C 1403☐ Correctional Facility NY014013C 1402☐ Yankee Compound NY011043C 1410Housing Location: ENE-#91Grievance #: _____
FACILITY ASSIGNS THIS NUMBERInmate's Name: Reeseie NashICN #: 49658

Brief Description of the Grievance (Completed by the Grievant):

Number of Additional Sheets Attached ()

Muslims @ the Holding Center are not being afforded services on consistent basis or every Friday or Tummah. Service on Friday/Tummah in Islam is MANDATORY and one is cursed if he fails to attend purposely. Religious services for Muslim populace is just as important as Catholic/Protestant ect., which is held on regular basis. The facility has failed to accomodate Muslims in that they have failed to ensure steady observance of Constitutional right to free practice of religion.

Action Requested by the Grievance (Completed by the Grievant):

Number of Additional Sheets Attached ()

That pursuant to Correctional Law 702.4-1, an inmate facilitator be allowed to conduct religious services when outside coordinators cannot do so. He must know the prayer, Fajr, Adhan, Khutba Tahajji and be muslim for a lengthy period - of which facility records will indicate or facility Liaison for Chaplains - Deputy Davis, may so select to hold services for continuity

Grievant Signature: [Signature]Date/Time Submitted: 11/25/13 @Receiving Staff Signature: [Signature]#1409 J. TranshiDate/Time Submitted: 11/25/13 1415 Hrs

Summary of Facility Staff attempts to resolve (Attach Relevant Documentation):

Number of Additional Sheets Attached ()

Above and beyond the scope of this dispute during [Signature] #1409

SGT FRANKLIN SPoke TO IMAM ON 11/25/13. THE IMAM HAS STATED THAT HE DOES NOT WANT THE INMATES TO HOLD ISLAMIC SERVICES WITHOUT HIS PRESENCE SGT FRANKLIN

☐ Language Barrier, List language _____: Name of Interpreter and affiliation _____☐ Cognitive Disability Barrier, Low literacy: If box is checked, what steps were taken to assist grievant? (List above)

Officer/Supervisor Signature: _____

Date/Time: _____

() I agree to accept the informal resolution to my Grievance

☒ I do not agree to accept the informal resolution to my GrievanceGrievant Signature: [Signature]Date/Time Submitted: 11/25/13

Forward to the Grievance Coordinator: Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

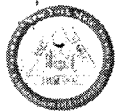
Officer/Supervisor Signature: SGT FRANKLINDate/Time: 11/25/13 1435

Received by the Grievance Coordinator:

Grievance Coordinator Signature: _____

Date/Time: _____

Exhibit 1 C



New York State Commission of Correction



Grievance Coordinator's Decision

Facility: Erie County Holding Center

Grievance #: 13G-211

Name of Inmate Reesele Nash 49658 ENE 91

Date Part I was received: 11/25/2013

Grievance Summary

Muslims @ the Holding Center are not being afforded services on consistent basis or every Friday or Jum'ah. Service on Friday/Jum'ah - in Islam is MANDATORY and one is cursed if he fails to attend purposely. Religious services for Muslim populace is just as important as Catholic/Protestant etc., which is held on a regular basis. The facility has failed to accommodate Muslims in that they have failed to ensure steady observance of constitutional right to free practice of religion.

Grievant's requested action:

That pursuant to Correctional Law 702.4-1, an inmate facilitator be allowed to conduct religious services when outside coordinators cannot do so. He must know the prayer, Iqama, Adhan, Khutba Tahajj and be Muslim for a lengthy period - of which facility records will indicate or facility Liaison for Chaplains - Deputy Davis, may so select to hold services for continuity.

Decision of the Grievance Coordinator:

Number of Additional Sheets Attached ()

(Including specific facts and reasons underlying the decision)

I have received and reviewed your grievance.

11-25-2103 Sgt. Franklin spoke to Imam, who stated that he does not want the inmates to congregate for Islamic Religious Services without an Imam present.

I find that your grievance has no merit. Grievance not sustained.

Name of Grievance Coordinator Sgt. HajnosSignature of Grievance Coordinator Sgt. HajnosDate: 11/29/13

() I have read the above decision of the Grievance Coordinator

() I agree to accept the decision

☒ I wish to appeal to the Chief Administrative OfficerGrievant Signature: [Signature]Date: 11/29/13Inmate response received by Grievance Coordinator on 12/2/13Grievance Coordinator Signature: Sgt. Franklin

Note: What "Imam" is saying in essence is - Inmates have no right to services unless He, the "Imam" conducts it, violative of U.S. Const. Amend. #1



New York State Commission of Correction



Chief Administrative Officer's Decision

Facility: Erie County Holding Center

Grievance #:

13G-211Name of Inmate: Reeseie Nash 49658 ENE 91 Date Part I was received: 11/25/2013

Grievance Summary

Muslims @ the Holding Center are not being afforded services on consistant basis or every friday or Jumuah. Service on friday/Jumuah - in Islam is MANDATORY and one is cursed if he fails to attend purposely. Religious services for Muslim populace is just as important as Catholic/Protestant etc., which is held on a regular basis. The facility has failed to accommodate Muslims in that they have failed to ensure steady observance of constitutional right to free practice of religion.

Grievant's requested action

That pursuant to Correctional Law 702.4-1, an inmate facilitator be allowed to conduct religious services when outside coordinators cannot do so. He must know the prayer, Igamma, Adhan, Khutbar Tahajj and be Muslim for a lengthy period - of which facility records will indicate or facility Liason for Chaplains - Deputy Davis, may so select to hold services for continuity.

Decision of the Chief Administrative Officer:

Number of Additional Sheets Attached ()

(Including specific facts and reasons underlying the decision)

9 CRR-NY 7024.3 (b) states, "When no religious advisor is available, the chief administrative officer may permit a member of a prisoner religious group to conduct legitimate religious activities."

The facility has provided your religious group with a religious advisor whose ecclesiastical credentials have been approved to facilitate religious services here. That advisor had some unforeseen circumstances that prevented him from conducting service on a few occasions. Those few occasions do not demonstrate a failure to provide your religious group with religious services. If this facility would be without the services of an accredited Imam for a prolonged period of time then I would consider the provision described above. However, that process would involve a vetting process to select a suitable candidate. I cannot sustain your grievance.

Name of Chief Administrative Officer Chief A. HarrisSignature of Chief Administrative Officer *A. Harris*Date: 12/3/13☒ I have read the above decision of the Chief Administrative Officer☐ I agree to accept the decision☒ I wish to appeal to the Citizen's Policy and Complaint Review CouncilGrievant Signature: *[Signature]*Date: 12/4/13Recieved by Grievance Coordinator Date: 12/4/13Grievance Coordinator Signature: *SGT FRANKLIN*

Exhibit 3

DATE: 4/23/2016

DEPUTY SHERIFF #1981

JUVENILE JUSTICE SYSTEM

New York State Commission of Correction

Grievance Form - Part I

Facility: Erie County Holding Center NY014023C 1403

Housing Location: ECHO NORTH EAST 35Grievance #: 16TG-078

FACILITY ASSIGNS THIS NUMBER

Inmate's Name: NASH, REESE LEICN #: 49658Brief Description of the Grievance (Completed by the grievant):

Number of Additional Sheets Attached ()

Page 15 of Inmate Handbook, JMB, States in part: The Erie County Holding Center - provides religious services for the Catholic, Muslim and Protestant Faiths. Chaplains of each of these listed faiths are on staff and available for consultation. Per U.S. Const. Amend. 1, NY's Minimum Standards, Institutions must provide services for each of the "listed" faiths; however, in the last (30) days, this facility has offered Jumah one time, on April 1st, 2016. At no other time was service conducted, constituting cruel and unusual punishment where Christian faiths are held frequently, although Jumah is not, has not and not in accordance with law, constituting separation and discrimination. (R)

Action requested by the grievant (Completed by the grievant):

Number of Additional Sheets Attached (n)

That Jumah be conducted, even if facilitated by inmate, where Islamically it is a sin to miss Jumah consecutively and also;

To be given a copy of each and every replied disposition of this matter, including this original form and Sergeant's reply.

Grievant Signature: [Signature]Date/Time Submitted: 4/23/16Receiving Staff Signature: [Signature]

#1508 Giardina

Date/Time Received: 04/23/16 2/30Summary of facility staff attempts to resolve (Attach relevant documentation):

Number of Additional Sheets Attached ()

The inmate has not come in to conduct services. I will make my chain of command aware of your concerns so they can be addressed. At no point are you restricted from practicing your religious beliefs on your housing floor.

☐ Language Barrier, List Language

: Name of Interpreter and affiliation

Officer / Supervisor Signature: [Signature]Date/Time: 4-23-16 2158

(x) I agree to accept the informal resolution to my Grievance.

() I do not agree to accept the informal resolution to my Grievance.

Grievant Signature: [Signature]Date/Time Submitted: 4-25-16

Forward to the Grievance Coordinator:

Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

Officer / Supervisor Signature: [Signature]Date/Time: 4-23-16

Received by the Grievance Coordinator:

Grievance Coordinator Signature: [Signature]Date/Time: 4-25-16

Exhibit 4

ERIE COUNTY SHERIFF'S OFFICE



MEMORANDUM

TO: Nash, Reeseie (ICN:49658)

FROM: Sgt. McAndrew 

DATE: 28 May 2016

RE: 16RG-071

This memorandum is to document our conversations regarding your grievances recently submitted. I have assigned the number 16RG-071 to your two grievances submitted. Regarding your grievance that you stated was altered, we spoke in the duty office on 5/27/16 regarding this grievance. We came to an agreement that you inadvertently checked that you agreed to informal resolution when in fact that was not your intent. We then discussed your issues regarding Muslim services and how Jumah is offered. I informed you that your grievance requesting that an inmate run Jumah would not be allowed due to the determination of the Chief Administrative Officer not allowing it. You previously grieved this issue in 2013 and the policies and actions of this facility were sustained by the CPCRC and your grievance was denied. Due to the CPCRC previously sustaining the actions of the facility, your current grievance will not proceed and is being returned to you. While discussing your grievance, your concerns with the proper running of Ramadan were brought up. I asked you to make a list of your concerns so that we could discuss them for possible further action.

On 5/28/16, we met in the duty office to discuss your concerns for upcoming Ramadan. You provided me with a list of your concerns. I also provided you copies of your previous grievances regarding Muslim services from 2013. In this meeting, we discussed your list and I informed you that your concerns would be presented to Captain Hartman and the facility Imam. I informed you that I would discuss with you further how your concerns would be addressed. I tentatively plan on speaking with you further on your issues approximately 5/31/16. If you have any further questions or concerns, I encourage you to speak with the officer of your housing area, the supervisor of your floor or you can submit a request slip directly to me.

New York State Commission of Correction



Grievance Form - Part I

Facility: Erie County Holding Center NY014023C 1403

Housing Location: ECHO North East 485

Grievance #: _____
FACILITY ASSIGNS THIS NUMBER

Inmate's Name: R. Nash

ICN #: 49458

Brief Description of the Grievance (Completed by the grievant):

Number of Additional Sheets Attached ()

On 4.23.16, I submitted a grievance regards Islamic Services and after a "summary of facility staff attempts to resolve" I indicated that [I DO NOT AGREE] to any informal resolution to resolve religious right deprivations and on 5/16/16, was shown a copy of said grievance which impermissibly shown that I agreed to accept coercive, although not corrective, resolution. I sent (2) slips for a copy of this, never received an answer and allege now that the Grievance Process here at ECHC is NON EXISTANT AND FLAWED @

Action requested by the grievant (Completed by the grievant):

Number of Additional Sheets Attached ()

That ECHC apply Minimum Standards Guidelines and create a working grievance process. That staff be advised against depriving detainees of due process - redress by grievances; On 5/13/16, an inmate was coerced by bribe to withdraw grievance - impermissibly - to avoid DOJ review of such allegations contained therein. That a copy of this grievance be given to me, and that no threats, coercion, harassment nor act of retaliation come from the filing of this grievance @

Grievant Signature: R. Nash

Date/Time Submitted: 5/23/16

Receiving Staff Signature: Carla (067) Castiron

Date/Time Received: 5/23/16 1345

Summary of facility staff attempts to resolve (Attach relevant documentation):

Number of Additional Sheets Attached ()

I spoke with T/M about this matter before and was not able to resolve so I notified Sgt. Rott on this matter and as far as I know he took care of it. I notified Sgt. on this matter. @

☐ Language Barrier, List Language _____: Name of Interpreter and affiliation _____

Officer / Supervisor Signature: Carla 9067

Date/Time: 5/23/16 1345

() I agree to accept the informal resolution to my Grievance.

(X) I do not agree to accept the informal resolution to my Grievance.

Grievant Signature: _____

Date/Time Submitted: _____

Forward to the Grievance Coordinator:

Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

Officer / Supervisor Signature: Carla 9067

Date/Time: 05/23/16 1412

Received by the Grievance Coordinator: Carla

Grievance Coordinator Signature: Carla

Date/Time: 5/24/16 0900

Exhibit 6

New York State Commission of Correction



Grievance Form - Part I

Facility: Erie County Holding Center NY014023C 1403

Housing Location: Echo North East #55

Grievance #: FACILITY ASSIGNS THIS NUMBER

Inmate's Name: R. Nash

ICN #: 49658

Brief Description of the Grievance (Completed by the grievant):

Number of Additional Sheets Attached (0)

The ECHC has grossly prejudiced muslim detainees by failing to provide religious services to muslims, as all muslim inmates are not afforded religious services in violation of Minimum Standards and the U.S.C.A. Amend 1. Services were not had on - 3/25; 4/8; 4/15; 4/22; 3/6 and 5/20, controversially prejudicial to muslim detainees. On 4/23/16, I grieved this issue and did not agree to formal resolution and the grievance was altered to read "agreed". This violates Minimum Standards - U.S.C.A. Amend 1; U.S.C.A. 5; U.S.C.A. 8 and 14; inasmuch as Christian services are regularly held and had while the facility seeks to silence failure to provide Tamar services.

Action requested by the grievant (Completed by the grievant):

Number of Additional Sheets Attached (0)

Freedom of Religion be granted; Facility stop prohibiting Tamar services to Echo detainees; Freedom to practice islam be established - where facility bans sales of Quran from Commissary; Facility stop promoting cruel and unusual punishment and provide equal protection of the laws. That I not be harassed, intimidated or annoyed due to this grievance and that my decision not to accept any coercive resolution not be altered and that I receive a copy of this grievance A.S.A.P. (P)

Grievant Signature: R. Nash

Date/Time Submitted: 5/23/16 @ 1:00 pm

Receiving Staff Signature: [Signature]

Date/Time Received: 5/23/16 1345

Summary of facility staff attempts to resolve (Attach relevant documentation):

Number of Additional Sheets Attached ()

I spoke with I/M about this matter before and was not able to resolve so I notified Sgt. Rott on this matter and as far as I know he took care of it. I notified Sgt. on this matter on July. @

☐ Language Barrier, List Language: : Name of Interpreter and affiliation:

Officer / Supervisor Signature: [Signature] 1067

Date/Time: 5/23/16 1345

() I agree to accept the informal resolution to my Grievance.

(X) I do not agree to accept the informal resolution to my Grievance.

Grievant Signature: [Signature]

Date/Time Submitted: 5/23/16 2:00 pm

Forward to the Grievance Coordinator:

Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

Officer / Supervisor Signature: [Signature] Supervisor #15

Date/Time: 05/23/16 1412 hrs

Received by the Grievance Coordinator:

Grievance Coordinator Signature: [Signature]

Date/Time: 5/24/16 09:00

New York State Commission of Correction

Grievance Form - Part I

Facility: Erie County Holding Center NY014023C 1403

Housing Location: Echo NEInmate's Name: Nash, Reesie

Grievance #:

FACILITY ASSIGNS THIS NUMBER

ICN #:

49658Brief Description of the Grievance (Completed by the grievant):

Number of Additional Sheets Attached (6)

On 6/11/16, Sgt. Slimak, violated HIPPA Privacy Laws by going to Muslim inmate population - Ramadan Services, and told said inmates, Reesie Nash has highly contagious disease called "Scabies" and did do an upper body torso check and hand check, during services, then asouted inmates pamphlets on "Scabies" from mediast by morning. This violates HIPPA RIGHTS TO PRIVACY, medical professionals, on average, lose their licenses to practice for some. (R)

Action requested by the grievant (Completed by the grievant):

Number of Additional Sheets Attached (X)

That no acts of retaliation occur based on this grievance, coercion, intimidation, threats nor harassment. That facility provide a copy of this grievance to inmate and advise writer of findings or action taken as to this matter. (R)

Grievant Signature: [Signature]Date/Time Submitted: 6/12/16Receiving Staff Signature: B. Prew 1500Date/Time Received: 6/12/2016Summary of facility staff attempts to resolve (Attach relevant documentation):

Number of Additional Sheets Attached (X)

This Dept. was unable to informally resolve this grievance that HIPPA was violated during Ramadan Services

☐ Language Barrier, List Language: _____: Name of Interpreter and affiliation: _____

Officer / Supervisor Signature: _____

Date/Time: _____

() I agree to accept the informal resolution to my Grievance.

→ (X) I do not agree to accept the informal resolution to my Grievance.

Grievant Signature: [Signature]Date/Time Submitted: 6/12/16

Forward to the Grievance Coordinator:

Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

Officer / Supervisor Signature: _____

Date/Time: _____

Received by the Grievance Coordinator:

Grievance Coordinator Signature: _____

Date/Time: _____

Exhibit 8

DATE - 6/13/16 C13
SUBJECT - HIPAA Violation

New York State Commission of Correction



Grievance Form - Part I

Facility: Erie County Holding Center NY014023C 1403

Housing Location: ENE # 92

Grievance #: _____
FACILITY ASSIGNS THIS NUMBER

Inmate's Name: Reggie Nash

ICN #: 49658

Brief Description of the Grievance (Completed by the grievant): Number of Additional Sheets Attached (✓)

On 6/11/16, Sgt. Simak did reveal to Ramadan inmates that grievant had "Highly Contagious Disease Scabies" then requiring strip search to determine whether inmates had scabies, violative of HIPAA. On 6/13/16, (3) officers and medication nurse, told inmates grievant was on Medical keeplock due to "Infectious Disease Scabies" thus requiring feed up tray violative of HIPAA and moreover, grievant NEVER HAD SCABIES. SECURITY STAFF SLANDERED GRIEVANT AND CAUSED IRREPAIRABLE HARM DUE TO HIPAA VIOLATION. GRIEVANCE WAS FILED ON 6/12/16 w/ DEP. PURCELL AS TO SAME, SGT. THEN FAILED TO FILE

Action requested by the grievant (Completed by the grievant): Number of Additional Sheets Attached (✓)

A copy of this grievance be provided to grievant, that no act of retaliation be taken due to filing of this grievance. That no coercion, threats, arrest or harassing conduct occur due to this grievance. That names of (3) officers at Ramadan Services be offered in resolution and name of Sgt. who did not log grievance be offered in resolution and through reason for not logging grievance be offered also.

Grievant Signature: _____

Date/Time Submitted: 6/13/16 6:55

Receiving Staff Signature: _____

Date/Time Received: 6/13/16

Summary of facility staff attempts to resolve (Attach relevant documentation): Number of Additional Sheets Attached ()

Informed 1/19 that Resolution is Against THE DEP Also that there is to given Taped For Grievances. Additionally, that I Am The ONLY TO Medical Files For Summary Is That in The Bedroom To Discuss Issue WITH

☐ Language Barrier, List Language: _____: Name of Interpreter and affiliation

Officer / Supervisor Signature: _____

Date/Time: 6/13/16

- () I agree to accept the informal resolution to my Grievance.
> (X) I do not agree to accept the informal resolution to my Grievance.

Grievant Signature: _____

Date/Time Submitted: 6/13/16

Forward to the Grievance Coordinator: Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

Officer / Supervisor Signature: _____ Date/Time: _____

Received by the Grievance Coordinator:

Grievance Coordinator Signature: _____ Date/Time: _____

Exhibit 9

ERIE COUNTY SHERIFF'S OFFICE



MEMORANDUM

TO: Inmate Nash, Reeseie (ICN:49658)

FROM: Sgt. McAndrew *LM*

DATE: 20 June 2016

RE: Grievance 16G-006

I have read and reviewed your grievance. You have alleged that medical and security staff provided other inmates with information that you feel was privileged medical information. I have interviewed staff members. Staff members state that no privileged information was released during medical checks for possible transmitted diseases. During an interview, I asked you who provided you with this information as you were not present to physically hear any of these assertions. You stated that, "everybody who was there heard it." You also said you could not name any specific people as witnesses. I canvassed other inmates who were present at Muslim services at the time your allegation took place. Other inmates stated they were not given any information. Witnesses further stated that you informed the inmate population of a possible medical condition that caused you to be medically isolated from the general population. Medical handouts were provided to the inmate population at their request to provide information on the subject matter.

I also find your assertion that you were "demanded" to fill out numerous grievances and that one was misfiled to be unsubstantiated. During our interview, I presented you two grievances filed for informal purposes and asked if they were indeed the only two grievances you submitted. You stated they were. I also asked if there were any additional grievances submitted that I should be made aware of. You stated there were not. Grievance form SCOC 7032-1 was provided to you after attempts at informal resolution were exhausted. You submitted this form accordingly, and an investigation was completed.

After speaking with witnesses involved, I find your grievance lacks merit and is not sustained.

Exhibit 10

New York State Commission of Correction

Inmate Grievance Form

Form SCOC 7032-1 (11/2015)

Facility: Erie County Holding CenterHousing Location: ENE #92Name of Inmate: REESEIE E. NashGrievance #: 1006-076Brief Description of the Grievance (Submitted by the grievant within 5 days of occurrence)

Number of Sheets Attached (✓)

On 6/11/16, Sgt. Slimak did violate HIPAA by telling Ramadan inmates that I had "Highly Contagious Disease Scabies" then did upper body search of Ramadan attendees. On 6/13/16, (3) officers and medication Nurse told inmates that grievant was medical keeplock due to "Infectious Disease Scabies" thus requiring feedup tray as grievant was alleged unable to attend. Violative of HIPAA. Grievant NEVER HAD SCABIES. Sgt. Gave Scabies Handouts to inmates noting that Nash would be cause of outbreak. (R)

Action requested by the grievant (Submitted by the grievant within 5 days of occurrence):

Number of Additional Sheets Attached (✓)

No acts of retaliation, coercion, threats, intimidation, threats or harassment occur based upon the filing of this complaint. The names of (3) escort officers of 6/13, be revealed, the name of Sgt. who failed to properly file grievance dated 6/12/16, and to be given copy of [this] complaint, as this makes 3rd time facility demanded I re-write this complaint prior to filing. (R)

Grievant Signature: [Signature]Date/Time Submitted: 6/17/16Receiving Staff Signature: [Signature]Date/Time Received: 6/18/16Investigation Completed by: Sgt. MelndraDate Completed: 6/20/16Decision of the Grievance Coordinator

Number of Sheets Attached ()

Written decision shall be issued within 5 business days of receipt of grievance and shall include specific facts and reasons underlying the determination

- ☐ Non-grievable issue as per 9 NYCRR §7032.4(h) (may not be appealed to CAO)
- ☐ Grievance Accepted
- ☒ Grievance Denied on Merits
- ☐ Grievance Denied due to submitted beyond 5 days of act or occurrence (can be appealed to CAO)
- ☐ Grievance Accepted in part/ Denied in part (Note specific Acceptance/Denial parts below)

Sgt. Melndra memorandum

Signature of the Grievance Coordinator: [Signature]Date: 6/18/16

Exhibit 11

1006

New York State Commission of Correction



5/16/16

1067

Muslim Services / Grievance

Grievance Form - Part I

Facility: Erie County Holding Center NY014023C 1403

Housing Location: ENE 85

Grievance #:

FACILITY ASSIGNS THIS NUMBER

Inmate's Name: Reese E. NashICN #: 491658Brief Description of the Grievance (Completed by the grievant):

Number of Additional Sheets Attached ()

About the 23rd day of April, PM Shift, I filed a grievance alleging facilities failure to provide Jumah / Muslim Services, and to date - In the last 60 days, Jumah has been held (3) times. Christians enjoy services weekly. This is discriminatory. I wrote "Grievance" on 5/1/16 stating that the Grievance process was defunct and that no reply was offered to me within minimum standards-required response time and said PG slip went unanswered. On 5/12/16 I sent Sgt. McAndrew a slip stating same again - requesting a copy of filed grievance and noting facilities failure to adhere to directives timeline regards grievance responses and actions - and again, no response was given. @

Action requested by the grievant (Completed by the grievant):

Number of Additional Sheets Attached ()

That facility create a compliant grievance process in accordance with NYS minimum standards; That facility employ local Imam for service regularity or appoint inmate facilitator to ensure regularity of services; That a copy of this grievance be given to me and that no threats, retaliation, intimidation, coercion or harassment take place in retaliation of this grievance. @

Grievant Signature: [Signature]Date/Time Submitted: 5/16/16Receiving Staff Signature: [Signature]

1067 (ASTRIVE)

Date/Time Received: 5/16/16 1100Summary of facility staff attempts to resolve (Attach relevant documentation):

Number of Additional Sheets Attached ()

This reply discussed grievance process with inmate. Explained how process works, and but inmate still requested grievance. As far as religious process goes, this reply was unable to resolve grievance and concluded Sgt. Grievance process is slow if not faulty but it's their.

☐ Language Barrier, List Language _____: Name of Interpreter and affiliation _____

Officer / Supervisor Signature: _____

Date/Time: _____

() I agree to accept the informal resolution to my Grievance.

(X) I do not agree to accept the informal resolution to my Grievance. @

Grievant Signature: [Signature]Date/Time Submitted: 5/16/16

Forward to the Grievance Coordinator:

Grievance must be forwarded to the Grievance Coordinator within 24 hours of submission

Officer / Supervisor Signature: _____

Date/Time: _____

Received by the Grievance Coordinator:

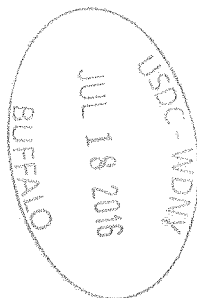
Grievance Coordinator Signature: _____

Date/Time: _____

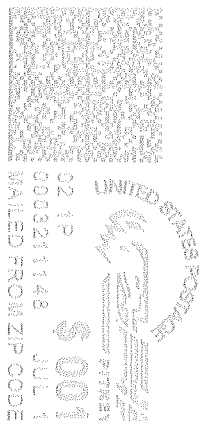
Exhibit 12

Reese E. Nash #491658
Erle County Correctional Facility
11581, Walden Ave.
Alden, N.Y. 14004

MD



Clerk U.S. District Court
United States Courthouse
Buffalo, N.Y. 14202



Paid